



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 9002

| | | | | |
|------------------------------------|---|---------------------|-------------------------------|---|
| SERIAL NUMBER 10/529,717 | FILING OR 371(c) DATE 03/30/2005 RULE | CLASS 340 | GROUP ART UNIT 2612 | ATTORNEY DOCKET NO. 040857/290672 |
|------------------------------------|---|---------------------|-------------------------------|---|

APPLICANTS

Geoffrey Haswell, Essex, UNITED KINGDOM;
 Simon William Fawcett, Leicestershire, UNITED KINGDOM;
 Paul Reece Holdsworth, Leicestershire, UNITED KINGDOM;
 Stephen John Bowles, Leicestershire, UNITED KINGDOM;
 Miguel Jesus Garcia-Hernandez, Barcelona, SPAIN;
 Antonio Turo-Peroy, Barcelona, SPAIN;
 David Matthew Smart, Leicestershire, UNITED KINGDOM;
 Juan Antonio Chavez-Dominguez, Barcelona, SPAIN;
 Jordi Salazar-Soler, Barcelona, SPAIN;

** CONTINUING DATA *****

This application is a 371 of PCT/GB03/04327 10/01/2003 *SW*

** FOREIGN APPLICATIONS *****

UNITED KINGDOM 0222680.1 10/01/2002 *SW*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

** 10/05/2005

| | | | | |
|--|--|------------------------|-----------------------|----------------------------|
| Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no | STATE OR COUNTRY UNITED KINGDOM | SHEETS DRAWING 9 | TOTAL CLAIMS 10 | INDEPENDENT CLAIMS 1 |
| 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance | | | | |
| Verified and Acknowledged <i>SW</i> Examiner's Signature | <i>SW</i> Initials | | | |

ADDRESS

00826

TITLE

Power consumption protocol

| | | |
|---------------------------------------|---|--|
| FILING FEE RECEIVED 500 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit |
|---------------------------------------|---|--|